

REQUEST FOR CONTINUED EXAMINATION (RCE) TRANSMITTAL

Address to:
Main Stop RCE
Commissioner for Patents
P.O. BOX 1450
Alexandria, VA 22313-1450

Application Number	09/832,753
Filing Date	10 Apr 2001
First Named Inventor	Topolovac et al.
Art Unit	2162
Examiner Name	Cam Y. T. Truong
Attorney Docket Number	OPEN-001

This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.

Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.

1. **Submission required under 37 CFR 1.114.**

- a. ☐ Previously submitted
- i. ☐ Consider the after final amendment(s)/response, together with comments therein, previously filed under 37 CFR 1.116 on _____
(Any unentered amendment(s) referred to above will be entered).
- ii. ☐ Consider the arguments in the Appeal Brief or Reply Brief previously filed on _____
- iii. ☐ Other _____
- b. ☒ Enclosed
- i. ☒ Amendment/Reply
- ii. ☐ Affidavit(s)/Declaration(s)
- iii. ☐ Information Disclosure Statement (IDS)
- iv. ☐ Other _____

2. **Miscellaneous**

- a. ☐ Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of _____ months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) **required**)
- b. ☐ Other _____

3. **Fees** The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.

- a. ☒ Payment by credit card is being made by EFS-WEB;
- b. ☒ The Director is hereby authorized to charge **any missing amounts** for the following fees, or credit any overpayments, to Deposit Account No. 50-0292
- i. ☒ RCE fee required under 37 CFR 1.17(e)
- ii. ☐ Extension of time fee (37 CFR 1.136 and 1.17)
- iii. ☐ Other Additional Claim Fee
- c. ☐ Check in the amount of \$ _____ enclosed

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED

Name (Print/Type)	Dov Rosenfeld	Registration No. (Attorney/Agent)	38,687
Signature	/Dov Rosenfeld/ #38687	Date	July 10, 2006

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